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B1a Data Sheet

CONFIRMATION NO. 4207

|                             |                                   |              |                        |                                 |
|-----------------------------|-----------------------------------|--------------|------------------------|---------------------------------|
| SERIAL NUMBER<br>09/893,044 | FILING DATE<br>06/27/2001<br>RULE | CLASS<br>375 | GROUP ART UNIT<br>2631 | ATTORNEY DOCKET NO.<br>GB000087 |
|-----------------------------|-----------------------------------|--------------|------------------------|---------------------------------|

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 0015621.6 06/27/2000

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 08/21/2001**

|                                 |  |                                    |                        |                    |                         |
|---------------------------------|--|------------------------------------|------------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR COUNTRY<br>UNITED KINGDOM | SHEETS<br>DRAWING<br>3 | TOTAL CLAIMS<br>13 | INDEPENDENT CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance |                                    |                        |                    |                         |
| Verified and Acknowledged       | Examiner's Signature   | Initials                           |                        |                    |                         |

**ADDRESS**

Corporate Patent Counsel

U.S. Philips Corporation

580 White Plains Road

Tarrytown , NY 10591

**TITLE**

Multicast radio communication system and apparatus

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|----------------------------|---|---|
| FILING FEE RECEIVED<br>710 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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